

# Physical Security Risk Assessment

A premises security assessment with assets, threats, vulnerabilities, existing controls, prioritised improvements and management review.

## 1. Record details and scope

### Project

Filled in from the project in SiteSurvey.

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**Site or premises address**

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**Client or organisation**

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**Record date \***

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**Person completing the record \***

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This records site-specific judgments. It is not a certification, police approval or an automated prediction of crime, and it does not replace an IT security audit.

Protective security guidance takes a risk-based approach: understand what needs protection, the threats and vulnerabilities, and the measures needed to reduce risk. A site security plan should reflect the assessment and establish responsibilities and procedures.

## 2. Scope and assets

### Premises and activities included \*

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**People, assets and operations needing protection \***

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**Information sources, incidents and assumptions**

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## Assessment limits and sensitive information handling

State the areas, evidence and tests excluded from this assessment. Keep sensitive credentials out of the record.

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## 3. Threat and vulnerability records

### Security risk (copy this block for each one)

**Asset or location \***

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**Threat scenario and supporting information \***

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**Vulnerability and existing controls \***

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**Assessor priority \*** (choose one)

☐ Immediate ☐ High ☐ Medium ☐ Low

**Reason for the priority and proposed improvement \***

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## 4. Plan and governance

**Security roles, escalation and incident response \***

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**Access, visitors, keys and contractor arrangements**

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## Changes and incidents triggering a review

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## Security plan reference

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## Manager reviewing the recommendations

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## 5. Actions and review

Are further actions required? \* (choose one)

☐ Yes ☐ No

Further action (copy this block for each one; if applicable)

Action and evidence reference \*

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Person responsible \*

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Target date

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Action status \* (choose one)

☐ Open ☐ In progress ☐ Completed

Completion evidence \* (if applicable)

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Outstanding limitations and information to pass on

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Record status \* (choose one)

☐ Ready for review ☐ Further work needed ☐ Work or use stopped

Reviewed by

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Review date

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Author signature \*

Signing records the information entered. It does not itself certify legal compliance, remove a limitation or authorise unsafe work.